



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in this Submission

Application Number	09/539,918
Filing Date	March 31, 2000
First Named Inventor	James M. Florence
Group Art Unit	2871
Examiner Name	Jeanne A. Di Grazio
Total Number of Pages in this Submission	Attorney Docket Number 7146.063

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee transmittal <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing Related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosures (identify below)
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Acknowledgment Postcard

Remarks:

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual Name Kevin L. Russell of Chernoff Vilhauer McClung & Stenzel, LLP

Signature

Date

December 19, 2002

CERTIFICATE OF MAILING

I hereby certify that, on the date shown below, this correspondence is being deposited with the United States Postal Service in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C., 20231

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Type or print name Kevin L. Russell

Signature

Date December 19, 2002

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TECHNOLOGY CENTER 2800



FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT **\$180**

Complete If Known	
Application Number	09/539,918
Filing Date	March 31, 2000
First Named Inventor	James M. Florence
Examiner Name	Jeanne A. Di Grazio
Group/ Art Unit	2871
Attorney Docket No.	7146.063

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge the indicated fees and credit any over payments to:

Deposit Account Number **03-1550**

Deposit Account Name **Chernoff Vilhauer McClung & Stenzel**

- Charge any additional fee required under 37 CFR 1.16 & 1.17

- Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed

Check Credit Card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
SUBTOTAL (1)				\$0	

2. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total Claims		-20** =	0 x 18 =	0
Indep. Claims		-3** =	0 x 84 =	0
Multiple Dependent				0

*or number of previously paid, if greater. For reissues, see below.

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
180	18	210	9	*Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				\$0

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **\$180**

SUBMITTED BY

Complete (if applicable)

Name (print type)	Kevin L. Russell	Registration No.	38,292	Telephone	(503) 227-5631
Signature			Date	December 19, 2002	

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT **\$110**

Complete If Known	
Application Number	09/539,918
Filing Date	March 31, 2000
First Named Inventor	James M. Florence
Examiner Name	Jeanne A. Di Grazio
Group/ Art Unit	2871
Attorney Docket No.	7146.063

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Check Credit Card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
SUBTOTAL (1)				\$0	

2. EXTRA CLAIM FEES

Total Claims	-20**	=	0	x	18	=	0	Fee from below	Fee Paid
Indep. Claims	- 3**	=	0	x	84	=	0		
Multiple Dependent							0		

*or number of previously paid, if greater. For reissues, see below.

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	*Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				\$0

3. ADDITIONAL FEES	Fee Description	Fee Paid
Large Entity	Small Entity	
Fee Code	Fee (\$)	Fee Code (\$)
105	130	205
127	50	227
139	130	139
147	2,520	147
112	920*	112
113	1840*	113
115	110	215
116	400	216
117	920	217
118	1,440	218
128	1,960	228
119	320	219
120	320	220
121	280	221
138	1,510	138
140	110	240
141	1,280	241
142	1,280	242
143	460	243
144	620	244
122	130	122
123	50	123
126	180	126
581	40	581
146	740	246
149	740	249
179	740	279
169	900	169
Other (specify)		
* Reduced by Basic Filing Fee Paid		SUBTOTAL (3) \$110

SUBMITTED BY

Complete (if applicable)

Nam (print type)	Kevin L. Russell	Registration No.	38,292	Telephone	(503) 227-5631
Signature			Date	December 19, 2002	